Establishment of Memorial Chest Clinic.—The board of directors of Mount Zion Hospital are in receipt of a fund of \$5000 given to the hospital by Mrs. Abraham Lincoln Brown for the establishment and maintenance of a chest clinic in memory of her husband. The clinic is to be known as "The Abraham Lincoln Brown Chest Clinic." The new department will consist of three branches: a pulmonary clinic, which has already been in existence for several years; an allergic clinic for the treatment of asthma and allied conditions; a chest department within the hospital for the diagnosis and treatment of all thoracic conditions, particularly surgical.

Of late years chest surgery has made tremendous

advances, so that operations on the lungs can be performed today with comparative safety. These operations will effect cures in patients who heretofore have

been doomed to early deaths.

A diagnostic group has been formed consisting of Doctors Harold Brunn, William C. Voorsanger, A. Lincoln Brown, and Fred K. Firestone, who are all particularly well trained in the field of pulmonary diagnosis and treatment.

The services of the clinic are to be available to all, inside and outside of San Francisco, either on a free or pay basis. Physicians desiring the services of this new department may refer their patients to the group in charge for diagnosis, no medical fee being required.

A completely equipped allergic clinic for the treatment of asthma is now in full operation. Facilities for complete x-ray and bronchoscopic examinations in

specially designed rooms are now being installed.

The donor of the fund has given the committee in charge assurance that more funds will be available as needed. The purpose of the fund is not only for the purchase of apparatus and maintenance of the department, but for subsidizing beds for worthy patients requiring diagnosis or surgical treatment.

Patients from out of town desiring to avail themselves of these opportunities should first consult their

local physician for reference to the clinic.

READERS' FORUM

San Francisco, California, December 28, 1928.

Re: Cyril von Baumann

Emma Pope, M. D.; George Kress, M. D., Editors.

Dear Doctors: We are enclosing herewith copy of a letter just received with a rubber-stamp signature— H. W. Moore, M. D., P. O. Box 1376, Pittsburgh, Pa.—alleging that Cyril von Baumann is borrowing money from doctors throughout the country, and is headed this way.

Reference to the Journal of the American Medical Association of October 27, 1928, page 1298, under "South Carolina," reads as follows:
"Cyril von Baumann's License Revoked.—The

State Board of Medical Examiners of South Carolina advises that at a meeting July 12, license No. 1691, issued December 2, 1926, to Cyril von Baumann, was revoked, annulled and canceled. It appears that on application for a license, von Baumann claimed to have graduated from the University of Heidelberg in 1914. An inquiry from the headquarters of the American Medical Association brought a reply from the University to the effect that a diploma had never been issued to anyone in the name of Cyril von Baumann in the period from 1910 to 1915, and that no student by that name had been matriculated during that time. The A. M. A. has had inquiries about von Baumann from different parts of the country.

His last known address was Bloomington, Mary-

land.

We believe it would be a wise procedure to have a notice placed in California and Western Medicine warning the doctors of California against imposition.

Very truly yours,

C. B. PINKHAM, M. D., Secretary-Treasurer.

TWENTY-FIVE YEARS AGO *

EXCERPTS FROM OUR STATE MEDICAL JOURNAL

Volume II, No. 1, January, 1904.

From some editorial notes:

A New Year.—The journal is more than glad to felicitate every member of the society upon the completion of its first year of life, and to extend to all its heartiest good wishes for a still more profitable New Year. From a mere child in long clothes, the society has grown in one year to a pretty vigorous youth, representing the potential strength of something over one-half of the eligible physicians of the state. Its growth has been phenomenal and is increasing with marvelous rapidity. . .

. We are considering the addition of physicians of Oregon and Washington, and making the Register a Tri-State Register. What do you think of the idea? The compliments of the season have been earned; we hope they will be even more deserved this time next

vear. . .

. . Pithy Papers.—The editor has attended several meetings for the organization of county societies, and has been struck by one thing more particularly than any other—the desire of the physicians who get to-gether to form such societies to omit the long, tiresome papers compiled from textbooks or journals, and to confine the work of the society meetings to short, pithy papers or reports that deal with practical questions and actual experiences. . . .

... A Vital Question.—One of our youngest component societies—Merced County Medical Society—discussed, at its first meeting, one of the most vital questions in the whole range of medicine: The status and abuse of the secret proprietary preparation. . . A safe rule to follow is to solely prescribe perfectly known drugs and medicines; and if a manufacturer declines to advertise the ingredients or the formula of his preparations, conscientious physicians can do nothing less than refuse to prescribe them. . . .

From an article on "Cases of Tuberculosis of the Genito-Urinary Tract, with Remarks," by George Chismore, M. D., San Francisco:

. Improved methods of diagnosis, together with a clearer recognition of clinical symptoms, have brought us to the conclusion that tuberculosis of the genito-urinary tract is far more frequently encountered than was formerly believed. . .

. . Treatment.—I have but little to offer in regard to treatment, regarding it as wholly expectant. . . .

From an article on "Peritoneal Adhesions-Their Symptomatology, Pathology and Prevention," E. E. Kelly, M. D., San Francisco:

. . . Asepsis has been the inspiration of much bad surgery. It has made safe, as far as the life of the individual is concerned, many operations which were formerly attended with a very high mortality. It has stimulated the performance of many operations that were formerly considered unjustifiable. A low mortality has become synonymous with good surgery. Many a victim of the scalpel is suffering more from the results of his operation than he did from his disease, while his case is used to swell the statistics of "successful operations" of the enterprising aspirant for surgical honors. . . .

From an article on "What is Conservatism in Mastoiditis?" by W. S. Fowler, M. D., Bakersfield:

... The position I take is that mastoiditis is and can be only a surgical disease, and that its treatment

^{*}This column aims to mirror the work and aims of colleagues who bore the brunt of state society work some twenty-five years ago. It is hoped that such presentation will be of interest to both old and recent members.